

MORRISON COUNTY DEPARTMENT OF PUBLIC WORKS

213 FIRST AVENUE SOUTHEAST

LITTLE FALLS, MINNESOTA

(320) 632-0121

RIGHT-OF-WAY ORDINANCE REGISTRATION FORM

REGISTRATION TYPE

Please check whether you will be the Owner of _____ Facility Owner
equipment placed in the ROW or a Contractor _____ Contractor
wishing to work in the ROW. If other, please _____ Other (Explain)
explain in next section. _____ Update _____ New
Are you a new applicant or
updating information?

REGISTRANT INFORMATION

(Company Information)

NAME: _____ If you checked other in Registration Type,
ADDRESS: _____ please explain below:
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: () _____ FAX NO: () _____

GOPHER ONE CALL INFORMATION (if applicable)

Registration Number: _____ ID Number (If Contractor): _____

LOCAL REPRESENTATIVE

Local Contact Person that can Speak for the Company that is authorized to accept official notices from the County and act as agent for the Registrant.

NAME: _____ PHONE: () _____
ADDRESS: _____ FAX NO: () _____
E-MAIL ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____

24 HOUR EMERGENCY CONTACT INFORMATION

NAME	PHONE NO.	PAGER	FAX NUMBER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CERTIFICATES AND LICENSES

Please attach copies of certificates as required for registration:

1. Certificate of Insurance, including listing Morrison County as additional insured when working on county right of way
2. Certificate of Incorporation (if incorporated)

FOR OFFICE USE ONLY

Date Approved: _____ Registered by Whom: _____
Emergency County Contact:
Name: _____ Name: _____
PHONE: () _____ PHONE: () _____